

## Post Secondary Instructor Verification of Employment

One of the requirements for granting credentials to instruct technical education is the verification of successful occupational work experience **(past 5 years)** in the field. Therefore, it is necessary that you furnish the following information:

***To be completed by applicant:***

Full Name (Print) _____ Soc.Sec.Number:_____
Address: _____
City, State: _____
Zip + 4digits: _____
Making Application for a credential to teach _____ at _____ (Occupational Area) (Institute Name)
in _____ (City)

***To be completed by employer:***

The above named person was employed by us from _____ to _____, for a (date) (date)
period of _____ weeks. Average hours per week: _____.(past 5 years only).
This person was employed as a/an _____ (Job Classification)
Job Description: _____ _____ _____ _____
Firm Name: _____ Signature: _____
Address: _____ Title: _____
City, State, Zip: _____ Date: _____

***Return this form to:*** Becky Nelson  
Office of Career & Technical Education  
700 Governors Drive  
Pierre, SD 57401-2291